

MDR Tracking Number: M2-03-1276-01  
IRO Certification# 5259

June 24, 2003

An independent review of the above-referenced case has been completed by a neurosurgeon physician. The appropriateness of setting and medical necessity of proposed or rendered services is determined by the application of medical screening criteria published by \_\_\_\_, or by the application of medical screening criteria and protocols formally established by practicing physicians. All available clinical information, the medical necessity guidelines and the special circumstances of said case was considered in making the determination.

The independent review determination and reasons for the determination, including the clinical basis for the determination, is as follows:

See Attached Physician Determination

\_\_\_\_ hereby certifies that the reviewing physician is on Texas Workers' Compensation Commission Approved Doctor List (ADL). Additionally, said physician has certified that no known conflicts of interest exist between him and any of the treating physicians or providers or any of the physicians or providers who reviewed the case for determination prior to referral to \_\_\_\_.

#### CLINICAL HISTORY

Patient is a 39 y/o male who presented initially with intractable L3 and L4 radicular pain and underwent a L3-4 laminotomy, facetectomy, foramenotomy, and discectomy with removal of a far lateral disc fragment on 9/28/2000. He tolerated the procedure well and subsequently returned to work full time. He now has primarily axial back pain with radicular pain/numbness in the hip, thigh, and plantar aspect of the right foot. By report, and MRI dated 3/4/2003 shows multi-level degenerative disc disease with severe desiccation at L3-4, a right side disc bulge and a large HNP in the right neural foramen presumably compressing the exiting L3 root. The patient was subsequently referred for five level discography L1-S1 for fusion evaluation.

#### REQUESTED SERVICE (S)

L1-S1 discogram (5 levels)

#### DECISION

The request for five level discography is NOT recommended as clinically necessary.

### RATIONALE/BASIS FOR DECISION

The use of discography for identification of discogenic pain is a commonly accepted practice in spinal surgery for physiological identification of painful discs. Typically the presumed painful disc is identified on MRI and subsequently injected along with one or two adjacent levels to act as controls. If this patient is being evaluated for possible fusion at L3-4, then five level discography is not indicated. Perhaps discography at L2-3, 3-4, and 4-5 would provide some useful clinical information. If all of these discs reproduce the patient's pain, he is a poor fusion candidate.

### YOUR RIGHT TO REQUEST A HEARING

Either party to this medical dispute may disagree with all or part of the decision and has a right to request a hearing.

**If disputing a spinal surgery prospective decision** a request for a hearing must be in writing, and it must be received by the TWCC Chief Clerk of Proceedings within **10** (ten) calendar days of your receipt of this decision (20 Tex. Admin. Code 142.5©)

**If disputing other prospective medical necessity (preauthorization) decisions** a request for a hearing must be in writing, and it must be received by the TWCC Chief Clerk of Proceedings within **20** (twenty) calendar days of your receipt of this decision (28 Tex. Admin. Code 148.3)

This decision is deemed received by you 5 (five) days after it was mailed or the date of fax (28 Tex. Admin. Code 102.4(h) or 102.5(d)). A request for a hearing and a **copy of this decision** must be sent to:

Chief Clerk of Proceedings/Appeals Clerk  
Texas Workers' Compensation Commission  
P.O. Box 17787  
Austin, Texas 78744

Or fax the request to (512) 804-4011. A copy of this decision must be attached to the request.

The party appealing the decision shall deliver a copy of its written request for a hearing to the opposing party involved in the dispute.

In accordance with Commission Rule 102.4(h), I hereby verify that a copy of this Independent Review Organization (IRO) Decision was sent to the carrier, the requestor and claimant via facsimile or U.S. Postal Service from the office of the IRO on this 30<sup>th</sup> day of May 2003.